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APPLICANTS

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None *NR*

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** CONTINUING DATA

** FOREIGN APPLICATIONS

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	<i>Mehr</i> <i>NR</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY NORWAY	SHEETS DRAWING 8	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2

ADDRESS

021005

TITLE

Arrangement and method for improved communication between participants in a videoconference

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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